

WILL ADMEND AT A LATER DATE

IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF
NASHVILLE TENNESSEE

2012 OCT -3 PM 3:35

U.S. DISTRICT COURT
MIDDLE DISTRICT OF TN

SHEMEKA IBRAHIM)

Plaintiff)

VS)

Docket NO. _____

MURFREESBORO MEDICAL CLINIC)

P.A. DOCTOR ANDREW H FORD)

et al)

JUDGE _____

SLEEP MEDICINE OF MIDDLE)

TENNESSEE)

KELLY A. CARDEN)

Defendants)

MOTION FOR MEDICAL NEGLIGENCE & MALPRACTICE COMPLAINT WITH
CONTINUOUS TREATMENT DOCTRINE

Comes now the plaintiff Mrs. Shemeka Ibrahim pro se style filing the above motions against defendants' Doctor Andrew Hunter Ford & Murfreesboro Medical P.A. Doctor Ford (here in after Ford) was at all time of the incident a employee of MMC and was the surgeon who was working on the Plaintiff on the day of the incident. The Defendant Murfreesboro Medical Clinic P.A. (hereinafter MMC) and their employees nurse Jane Doe (hereinafter Doe) of MMC and at the time of the incident was employed and working for MMC as a nurse and was responsible of the material and supply count on August 10, 2011. The Defendant patient advocate Mrs. Betty Rose and Jennifer Wilson the office manager who at the time of the allege incident was a agent/employee for the defendant MMC who operating their business at 1272 Garrison Drive Murfreesboro Tennessee 37129

Defendant Doctor Kelly A. Carden who at the time of this complaint was a employee of Sleep Medicine of Middle Tennessee (hereinafter SMT) who is doing business at 300 20th Avenue North Suite 8G Nashville, TN 37203 and was a employee of SMT at the time of this complaint and for her personal interest of this case. Carden had told be to visit Ford back in May 24, 2012 in which she wanted me to do something that **was not legal** and she did not mention this in my medical records. She is adding thing in my medical record and selecting careful wording instead of the entire visit what we discuss. Even though she knew I did not want to go back. And she knew this and I went back to do of what she asked me to do. I gave her intent letter back in August in which she has not responding to the intent letter. Based on information and believe she and Ford may have the same insurance company State Volunteer Mutual Insurance Company. But she choice to ignore the law new law requirements because someone is filing pro se temporary is **unjust** and should not go unpunished.

I gave notice prior to the filing of this complaint. The intent letter was only to give a brief description of the lawsuit to the defendants for the purpose to try to settle the matter before filing the suit. Based on information and belief, The Defendant has not

Doctor Ford et al did not merely make a mistake. These doctors should not get off lightly. Because to date since they did not inform me of what disease I am frighten made it hard for the ER doctors to treat since I could not tell that doctor what I truly have. I have I am so scared and by walking around here on earth having doctors tell you that I am frighten an unknown bacteria infection, or I have an **uncertain finding** of a **bilateral enlargement of my saliva gland**. And it's a incidental finding do not make since when the finding was always their but overlook by these doctors. The reason it was uncertain is because of the delay of informing and treating me with care by taken the medical complaint serious enough so that no one has to such server pain. The harm these doctors cause me of go through very, pain was very hurtful. And to take my money and not inform me of the mass, lymph nodes this can mimics a malignant Medicare had to pay for unnecessary treatment. This was one of the delay the true treatment I was lacking steroids as a result of these Ford and the other doctors not taken the chief complaint in a serious matter allow the mass/lymph nodes to multiply because the believe that my pain was **make believe**. The conduct was done during their employment and while on company time. It was done with such intentional and recklessly. This hateful behavior for what, just for telling to truth about my pain and now I have the scans and scars to prove what I was saying all alone. I am ashamed and embarrass with the way I was a treated as a victim of such outrageous behavior. Based on information and belief, I truly believe each of these doctors have the same insurance company policy carrier. And this carries a lot of weight as to how these doctor have no choice but to protect each other so that they policy would not go up from legal action his or her practices.

A patient should be able to tell the truth as to what happen to them during surgery. But these doctors I saw truly had each other back. I had to go to the extreme to prove I was not making this illness up and the first foreign object that was left in me in September 01, 2012. And the one foreign object he made from my own body parts to make the nasal bridge in order to make my nose straight. I now wish to file the above

motion and is asking for a delay in this file due to the bizarre and uncontrollable I will state my claim in this complaint and through out this medical malpractice & negligent for failure to diagnose in a timely matter and this negligent lead to lymph nodes to grow bilaterally. And the uncertain finding to allow **bilateral swallowing saliva enlargement gland** to grow without treatment or in the maxillary sinus wall and I can until legal counsel is hired. This is one of a case that is complicated and should not have gone this far. The plaintiff is suing for slander because these doctors had insulted me by saying that I have mental problem as to why I was hurting so bad. The doctors fail to obtain medical record of minds and do a comparison of referral records and medical images report to find the true cause of my illness. Instead they all ignore the chief complaint instead of dealing with this issue in hand. I had a doctor by the name of James E. Taylor who is board certified as a license **Otolaryngologist and board eligible for behavior health physician**. The problem is that the doctor has not pass the test to be a behavior health physician and trying to diagnose a patient who comes in their office and barely treat the chief complaint by distribute antibiotics with out doing a infection culture or biopsy of the sinus wall is just negligent.

consists of several medical negligent/malpractice patient abandonment assault and battery and Ford failure to inform the Food Drug & Administrative of my complaint with the Bovie electrocautery device and the reused of my cartilage after it has been crush and inserted back into my nose without taking a tissue sample to the pathologist lab for testing. This has caused me to have recurrent infection and sever pain in the bridge and side of my nose and the nasal tip. The defendant Andrew Hunter Ford (hereinafter Ford) a general ENT surgeon who mislead me and other former and past patients to believe that he has perform and is qualified to practice and advertising surgeries as a Otorhinolaryngologist, Rhinologist to name a few. Ford had one of the best advertising companies who are able to lead people to his site by listing this type of special inquiry as one of his skills. The problem with this is that Ford does not have his **sub specialty license** in all these area of fields. In order for Ford to be an **Otorhinolaryngologist** a candidate must obtain a medical degree in a four year-sub specialty program and complete with a residency, is required. Since the complaint, Ford had been trying to get his **advertising clean up** to just advertise him as a **General ENT Otolaryngology**. **Ford only** has one **sub specialty license** and that is in an ears nose and throat (ENT) Otolaryngology. Ford who is only a Otolaryngology based on information and belief, Ford have done some type of **Rhinoseptoplasty, Extracorporeal, Tubinecdtomy** (spelling) and nasal tip projection with augmentation to me. I am a victim of a surgery gone wrong. Ford had misused my consent to do some type of **Open Setoplasty** this was **an unnecessary external incision**.

Ford has derelict his duty as a healthcare provider to exercise a sufficient standard of care and diligence; was negligent in his failure to inform, diagnose and treat me; was negligent in performing inappropriate and unnecessary surgical procedures, neglecting to consult a specialist until it was to late; failure to report the complaint to the Food and Drug Administrative (hereinafter FDA) for what ever the device or my old cartilage could be cause infection and is cause my body to reject this in my body. And, these actions cause the loss of consortium with my husband and **violated state laws by**

collecting fees through fraud or misrepresentation. What you do not know that this company has done this before back in 2003 on whistleblower lawsuit and the case against HealthCare Company (hereinafter HCA), Inc. its home office is based out of Nashville Tennessee. HCA was charge for criminal charges fines and civil restitution and penalties. The investigation revealed that HCA had systematically cheated Medicare, Medicaid and other federal funded health care programs through schemes dating back to the government recovered back to the 1980's with referral of patients. This behavior have not stop it still continue to this date and I have the evidence to prove this.

Now, I placed my trust with my ENTs, doctors, neurosurgeon and radiologist with those in the healthcare professional who were involved with my medical care. I had no reason to doubt that during my course of my nasal repair surgery. And, to date I am still receiving **continuous care** in which I schedule a November 5, 2012 doctor appointment with Doctor David Slavitt who practice in New York and one with Doctor Shah in October 5, 2012 in Chicago. The reason I had to go out of state is because Ford done an unrecognized **Open Setoplasty** procedure that no general ENT is aware of.

I have seen several ENTs here in Tennessee. The problem is that it took them a year to tell me this bad news. I never had seen anything like this no local doctors did not recognize a particular Setoplasty procedure. This was done by means of an **open Rhinoplasty approach**. I was unaware until August of 2012 a year after the surgery. These ENT doctors who provided their services to me would not even tell me why they would not perform a Septoplasty like this. I believe because it is **unpredictable or it was an experimental procedure**. Either way, I do not know what this man done to me and still do not. It is undisputed that a patient should have the right to know what is being done to them during surgery.

Now, the radiological services are an essential part of my care which my neurologist, ENT and PCP could not properly treat me. I saw Doctor Danielle S. Cherdak (hereinafter Cherdak) twice one April 17, 2012 and another before this date. Cherdak who is a head neurologist informed me she only deals with the head area. I told her that I did not want any medication and that I just wanted answered to what was going on with me. Doping me up was not solving the problem with my inflammation, nerve headache, nasal, facial, ears, cheek, and jaw and neck problem. She told me that she could not treat my nasal problem that I had to go back to Doctor Vinson I felt that I was going back and forth in order to find a doctor who would just listen.

Prior to Doctor Cherdak appoint. I then saw Doctor Edward Lee, she told me that she would not be able to help me with my nasal problem while reading the letter I gave her of from Ford of my medical operation transcription report she told me this as if she just did not want to get involved. During the visit she asked me why I am walking with a cane. She said that I am too young to be walking with the cane. I then told her that I should not be discriminate because of my age. She then got quite as if she knew she had hurt my feelings. The problem was I went there for one reason but she treated me with another one. This is one another reason of my delay of care.

What is undisputed that **under the differential diagnosis method**, doctors are required to make a list, either physically or mentally, of all of a patient's possible conditions that could be the cause of the patient's medical problem? The list is based on the patient's symptoms, medical history, physical examination, and the results of any preliminary tests or other observations. The possible conditions should be ranked by order of **severity and likelihood**. Once the list is complete, the doctor is required to go through the process of confirming or ruling out the possible conditions on the list, starting with the most serious **potentially life threatening condition first**.

Ford done changes in my nose that cost loss of my skin and nasal tip damage that lead to two tones in color. I believe this could be causing my infection too. My nasal wall skin look burnt and about 3 to 4 mm is completely gone and you can see this from your naked eye. I believe that this was done by the Biove electrocautery. Ford had burn and dissected too much of my nose cartilage and this was noticeable. This too was not written in my medical notes during the procedure. And, what I am upset about is how the other ENTs' are either being influence by their insurance company. Who is representing Ford and Murfreesboro Medical Clinic (hereinafter MMC) this to me is a conflict of interest. These doctors are taken my money and not informing or referral me to a place that could assistance me with my illness. Instead my blood pressure is elevating from 181/101 and pulse being 107 and temperature is at 99.8 the least and the highest was 102. Along with having sinus, fatigue and nasal pain I have been battle the fever for more than sixty days and its scary that know one have an idea as to where this is coming from. The delay has cause a fever in which the ER and Sangeetha do not know where the fever is coming from. Doctor Greaves from Summit thought I have been **out of the country or in the mountains**. I told the doctor that I do not have a pass port. I was diagnosed with sinusitis and a **rare mucus/bacteria infection**. I have been told by Doctor Kelly A. Carden (hereinafter Carden) that no doctor in Tennessee going to touch me within a ten foot pool. The reasons the ENTs are over looking Thyroid **enlargement that is present now but never had this problem for thirty nine years until now** and for no reason a biopsy has not been order or medication or done a culture test to treat the thyroid mass.

The reason I knew this is because I have a copy of my CT scan and the radiologist forgot to remove the final result notes from the patient copy. This scan was performing in January of 2012 and Mark Williams was the one who order it. **This mass has grown bilaterally and is spreading through out my cervical neck and my symmetric submandibular gland has enlarge and the significance of this finding is uncertain what the radiologist said.** Fail to laboratory test fir SS-A and SS-B antibodies since the patient was treated with antibiotics and swelling could not be resolved by treatment with **antibiotics and antiphlogistic agents** And fail to do a biopsy sample of the left submandibular gland or **histopathological examination** But just not to compare my other MRI, CT scan, and X-ray is just ridicules. And not to **perform a biopsy** is not right. I continued to have mild left maxillary sinus mucosal thickening in which the reason **it is mild** is because Ford remove more than 1/2 of my turbinate in which if you look at my scans too it will look more than 1/2 remove and I was unaware that he was going to remove them at all.

Now, over the course of months, the forces of my skin were it was stretching making a knuckle popping sound without the sound being present. The pain got some bad that it became num and spreading through out my face. This was the only way I could describe the pain. I have never felt like this before in my nose so it was hard to explain to the doctors what was causing my pain. I believe that something is pressing on my dorsum columella. Ford was hoping that he would have got away with what he done to me and he would have if I did not have pain in my nasal/dorsal tip. The removal of my nasal tip cartilage and what ever else he removes made it easy for infection and pain to form. **My nose is two tones in color** and my nasal is missing some skin on the right lower nostril. It looks as if it has been burn. This was not part of my informed consent, and I was aware of this risk skin color change.

Now, a minority of **surgeons** use the **open approach** exclusively for all their patients. Reasons for doing so may **include a lack of experience** with the closed approach. It is important to note that multiple grafts including columellar strut grafts and batten grafts are sometimes more easily inserted through the closed approach. While the open rhinoplasty incision generally heals beautifully in skilled hands, **an unnecessary incision is always best avoided.**

This lawsuit brings about the doctors **failure to diagnose the injury of postoperatively**. A high level of suspicion for nerve injury should be maintained after all nose surgery. Denial by the operating surgeon of possible injury delays appropriate treatment and may complicate the physician-patient relationship. If a nerve injury is suspected, do not make a timely diagnosis, taking responsibility for the injury, and referring the patient for physical **therapy and possible repair by an experienced peripheral nerve surgeon**. I had an honest and open communication with these doctors and I felt betrayal because they thought I this up.

Now I am requesting this court to **Balancing the Equities** in this case. I am requesting for an extension of the time limit or a delay in filing because I would like for this court to consider the facts, which might have justified a delay over the time limit and decide whether I would have a **Equity** (fair play) in this court. This was not under my control. I am still having continued of care which is out side the states and in the process of corrective reconstruct nose surgery.

Now, after the surgery in August 2011 I still suffer with difficult breathing, plus nasal pain, post-nasal drainage, loss of taste, smell, gasping while sleeping. On January 2012 examination revealed poor healing in the left maxillary sinus. My husband had to take me to most of my doctor appointment and confront me by kissing me in the effort to relax me and turning the television station to my favorite show. And, now he and I have to travel out of state in to get my reconstructive surgery perform. All of this has keep me from deteriorate. **“Continuous representation doctrine”**

I would be able to show that the defendant radiologist and on the unique medical—legal issue it raised, the **doctrine of continuum** of care because these ENT I have saw here did not recognize the procedure Ford did and inform me that they would

not do this at all. This lead me to search for a doctor that was out of state after calling several doctors here in Nashville Tennessee told me that a **Septoplasty is only a close procedure not a open one**. The only way you would do an open approach is when the **septum is severally deviated** and there was no other choice to work on the septum.

In my case my nose was only deviated on the left side of my nose at **3mm**. However, when there is continuum of negligent of medical care related to a single condition occasioned by negligence, over a finite period of time. The allegation is that the facial CT scan was misinterpreted when originally read. In addition, none of these ENT doctors notice that I had a maxillary bone crust. The test was misinterpreted again On January 2012 Thus, there are several negligent acts relating to one condition in a finite period of time. What is undisputed is whether the tests are separate and discrete as defendant claims or a continuum of negligent treatment as my claims. It was undisputed that my MRI, CT Scans and X-Ray should have been **compared to each other**. I have been telling each of these doctors to do this but these doctors just ignored me until I got feed up and brought the paper to them in August 2012 when I gave it to Doctor Williams, Vinson and Taylor

BACK GROUND HISTORY

July 03, 2010 A Maxillofacial CT without intravenous contrast. Physician Ford did not mention a **maxillary crest spur** or nothing was noted of my nasal cartilage was remove. It was noted from Southern Hills Hospital radiologist that I had nasal swelling and a **3mm leftward** nasal septal deviation but there was nothing writing about the turbinated swelling. It was not mention in Ford medical **finding during my surgery**. Based on information and belief, this **oversight of Southern Hills radiologist department lead to the crushing and removal of my maxillary crest spur**. This was the first incident of the radiologist dictation be missing critical information.

July 19, 2010 I went to Middle Tennessee Ear Nose & Throat they are own by the same company, HCA. The only different they did when they got sued years ago, they chose to change their name to **TRISTAR**. Based on information and belief, they (**TRISTARE/HCA**) are back in business doing the same thing years ago. The only different his is they are making up for old time.

What I do know is **that Turbinectomy later** fell out of favor because of rising concern over complication such as rhinitis sicca, atrophic rhinitis, and ozenam. The enlarged nasal cavity resulting from turbinate resection was believed to increase nasal airflow and reduce the humidifying capabilities of the nasal mucosa, resulting in drying, crusting, and mucosal atrophy. However, **the removal of turbinate surgery remains controversial** and again I do not want to be a statistic.

July 15, 2011 Ford stated in his dictation that, he consider for me to have a reduction of turbinates for **improvement of nasal airway**. Again, Ford impression finding did not **mention a maxillary crest spur**. The reason why? Is because he did not order any **x-ray** or he did not request any old MRI or CT scan on my nasal. What I do know is that **all**

ENTs do some type of X-ray or CT scan before surgery. Ford did not tell me that he was going to make an **external incision** underneath my nose which leads to a permanent scare for the rest of my life. The purpose of Ford exploring in my nose to perform some type of **Open/ Basic functional Rhinoplasty** surgery to fix my deviated septum Ford did not inform **Medicare/Medicaid** with the incision underneath my nose to do a **Functional Rhinoplasty to improvement my nasal airway**. Based on information and belief, none of my post office visit was charge from October 20, 2011 and October 17, 2011 and September 01, 2011 because Medicare would not be entitle to pay Ford for leaving a **foreign object** in me. Ford removes the object on September 01, 2011 that morning. The surgery for this do requires **leaving a nasal packing** in for a few days. The problem is that Ford did not mention that he left a nasal packing and or a graft/stent in me. The procedure/technique requires it.

I witness this myself; it is against the law to charge for a mistake that happening during any patient operation. Ford office visit was a total of \$125.00 each time a patient enters his room. I called Medicare and they told me that **he did not submit a claim** for those services other than on October 20, 2011 and maybe August the 17, 2012. When I had a Maxillofacial CT scan done on my nasal they check for sinus infection and anything else that evolve the sinus.

Now, **under our system of justice system** the consent to treat: In **1914, Supreme Court Justice Benjamin Cardozo** wrote:

"Every human being of adult years and sound mind has a right to determine what shall be done with his own body; and a surgeon who performs an operation without his patient's consent **commits an assault** for which he is liable in damages. This is true except in cases of emergency..."

Another Justice Cardozo's wrote that strongly worded decision gave patients real but still limited power. Although doctors at the time were required to get permission from patients to perform surgery, they were not required to explain the potential risks. **Decades later** the courts have declared that patients have a right not only to say "yes" or "no" but **give meaningful** consent, which can be given only after all of the potential risks and benefits of a procedure are explained to them. But in my case Ford did not inform me that of a partial turbinectomy could lead to the development symptoms of atrophic rhinitis. They called this condition "**empty nose syndrome**" to depict how unnatural these noses looked in CT findings and upon physical examination. I have emphasized how negatively this condition had affected **the quality of my life and sense of well being and my nose has** worsen over the year, which has cause damage and wear and tear due to the loss of my turbinate protection, as there was no other cause that could explain this. There is the controversy with removing turbinates. And I did not want to **be part of this debate**. I do not know if Ford done a spreader grafts to open up the internal nasal valve to make breathing easier. The whole **goal is to widen the nose and open up your airway**. Ford **diced my rib** cartilage, the problem is that when he crush my nasal cartilage and bone he left no support their. I don't believe he use a strut or graft. Ford problem used old crush cartilage to build the septum and nasal tip support. Ford did not

use any thing solid to protect my nasal septum. Ford did **not weigh his option**. The reason I think Ford did not use a graft is because he do not have the level of expertise and training to **proscribe the right graft to used**. I think that Ford does not have experience **with synthetic grafts and he limits his practice**. Doctor Ford determines the type of procedure should have been the most appropriate for me not for him.

The unethical and moral behavior I have witness from these doctors such as Sangeetha told me that Ford was going to **cover up** the indent of him leaving the left nasal packing in me. Sangeetha told me to just let it go. I told her I will not let something like this go. She and Carden both told me to go back to Ford knowing that I did not want to go. She (Sangeetha) wanted me to do the same thing Carden wanted me to do but they did not mention the advise they gave me to do. But she did not but the problem is that she too has **personal interest in this case** they both was building up my medical record to try to support their colleague and this was why they should continue to take me as a patient . I t was a conflict of interest and their action went beyond a patient and doctor relationship. Too delay me from get the medical help I truly need. **Doctor Ford is her son's doctor**. She keep saying that her other patient did not have this problem I was having. I asked her did they have a external incision from a close procedure. She said that she was not for use. This was why I asked her to compare their medial records to mind and I would have betted that I was correct. I told her this is a conflict of interest and she said no it wasn't. And this is why her judgment would be one sided and defensive and this made my care more difficult to the point I brought a friend at my last visit so she can see it for her self.

Based on information and belief, I think all these doctor have State Volunteer Mutual Insurance Company as their carrier this was another reason for finding outside doctors. What I did not know is why these doctors here would not perform this type of Setoplasty surgery and would only **verbally tell me this and did not put this information on my medical record**. It is uncertain this information was not in my medical record I was given a brief summary as to why they would not do a surgery like this. I felt that everything that is discussed in a doctor's office visit is not document. I witness this for myself. There have been doctors that do selective listen and Ford is one for them. What for problem did not mean to do is that he adjusts the way my nature warm, moistened and filtered way of breath out of my nasal.

This complaint demonstrates how widely ENT surgeon's opinions and approaches vary, sometimes even contradicting each other. This is what happens to me, Ford choice to do a dorsal augmentation alone with the other multiple procedures and diced my cartilage; soft tissue was not of my consent. **What Ford did was trying to contradicted what he was doing and hoping for a better alternative to correct the septum**. Ford uses my crushed cartilage for my nasal tip and **did not preserve my cartilage** for testing during or for future surgery to a **pathology lab**..

Its is possible that **Ford could have done 400 nose surgery in a year or two but a high number does not mean he is better then someone who done less surgery in a year**. Ford does not worry about how much nose surgery he done instead of doing longer procedures on the nose he is being concerned with the quantity instead of the quality of

his work. **Morselization is the crushing** of the **deformed septal** segment so that it can heal in a straightened position. The **disadvantage of this procedure is when you morselization the cartilage and bone it would make the nose weak** effect upon the cartilage and the **unpredictability** of the result. The extreme problem with this technique is that you can not see any of the crush cartilage on a MRI, CT scan, and X-ray.

On July 15, 2011 I done my pre op blood work for my surgery for August 10, 2011, the test show that I was anemic but no one from Ford office called, wrote a letter to inform me on this illness and inform me how to take care of this problem. At this time Ford did not run any Thyroid test at in 2011 at all. But on my last visit with him on May 24, 2012 he stated that he gave me medication for this illness but he never informs me of this matter. I told him this in back in May.

August 1, 2011 Went to Murfreesboro Medical Center Surgi Center signed in and gave information to nurse got undress and vital signs for before surgery. The surgery got reset for August 10, 2011 because I ate a 1 inch of muffin.

August 10, 2011 Informed consent: **code 30520 repair** of the **nasal septum** excise of inferior turbinate 30130 some how work was done on my **anterior and posterior** was deflected and resected cartilage was crush too. I was build for a 30140 for a **Turbinecdtomy** in which I was not aware of this. Ford removes or cut my turbinate. If Ford would have told me he was planning to I would not give anybody permission to remove turbinate without being told everything he was going to do. This has effect the way I breathe even though my nose is nice and wide my breathing is not the same this is why I am still on the sleep path machine still today. The surgery was suppose to correct the way oxygen enter my body at night.

The problem is that **Doctor Ford** never told Medicare/ Medicaid and I that he was performing an **Open Rhinoplasty approach for a Setoplasty**. If he did they would not have paid for this operation. They would have called it incidental/ experimental or just not medical necessary. Ford had removed my maxillary crest spur (bone). Ford did not state this in his finding on my operation report or did he told me that I had a bone spur and morselize (crush) them. I was never told that he was going to remove cartilage and bone from my nasal tip and he did not put the in his dictation report during and after surgery. Doctor continues to leave out detail information about my operation. Ford behavior prolongs my illness for over a year because he was not in detail on the operation report instead drafting a detail comprehensive medical operational transcription. Ford did a small SOAP impression of my procedure.

My full consented brings respect, and good treatment plans, but, hiding information from a patient is just unjust and wrong. The reason I believe Ford done a open Rhinoplasty because with a external incision was made underneath my nasal and none of the doctors I saw any of them wanted to inform me of this. They took I did not understand why Ford done this technique for a Setoplasty surgery. Based on information and belief, **there should not be any incision** underneath my **nasal period for the operation I had done**. And there should not have been any work **done on my nasal tip**

at all this is a total a different procedure. If Ford **never open me up** from the get go I would not be having this problem with my dorsal nasal tip. My consent did not give Ford the free-will to do as he please with informing me of what all he was going to do. What we now know for sure is that we do not know what all Ford did until I they **reopen** me up and I **film** the operation.

Ford did the **external approach** which allows the infrastructure of the nose to be completely exposed and accessed. **However, I did not agree to this.** What I do know Ford done this technique to allow him to be more precise surgery and is generally preferred when performing tip work. What I know after researching Ford made the incision in which he felt was a **small sacrifice** for me (the patient) but I did not want a scare on my face period.

Now, I called the both medical boards about Fords medical license in Arizonian and Illinois to check to see if Ford a **license from a Board Certified Rhinoplasty Facial Plastic surgeon or Rhinologist** he is not. I then check to see if he has a **double board certified facial plastic surgeons** certificated he does not. Ford may have **the passion and artistry** to do Rhinoplasty but the problem is he does not have a **sub specialist** or techniques innovations in plastic surgery or facial plastic surgery, or **Plastic and Reconstructive Surgery**. However, Ford been advertising himself as he was one. Ford only has **one specialty** and that is a General **Otolaryngology-Head and Neck surgery** Ford is an older surgeon and has been grandfather in for certain certification, but Ford is taken advantage in which I believe all surgeon should have continuous education because things change with time.

But the problems stand that the polysomnographic result show that I still needed the CPAP machine. I have the same problems with my breathing sleeping with a CPAP machine. Ford had to use a **packing the nose with cotton** – but is rarely necessary nasal congestion, mouth breathing, dry mouth, or a reduced sense of smell chronic nasal obstruction may include nosebleeds, recurrent sinus infections, sinus pressure headaches, and sleep disturbance. When left untreated, these symptoms can eventually give rise to more serious manifestations of chronic nasal dysfunction including insomnia, hypertension, obstructive sleep apnea, and even heart disease.

functional nasal surgery involves surgical treatment of the internal nasal passages without alteration of the outer nose this is why I do not understand why Ford bother with my nasal tip. He was only to do a **closed Setoplasty, reduction of the inferior only turbinate reduction**. But when he opens me up Ford fail to address the **nasal polyp or cyst** that was in my nose and still in their today. Ford left them inside me because he stated that he was not **treating my sinus**. The problem to this is this was the reason for one of my reason for seeing him in the first place on July 15, 2011. (See attachment) This too could have **been some of my nasal problem**. *Ford did not touch or dictate that I had a nasal polyps or cyst* he fail to mention this too on my report. The cyst/polyps had been inside me since 2006 and were never remove or left on its own Ford did not send this or other tissue sample to the pathology lab to see if it was benign or not. Sometimes the cyst/polyps can cause obstruct nasal passages. In mild cases, the removal is

straightforward, but the probability of recurrence is often high. **Aggressive allergy** treatment, especially fungal allergies, often reduces the recurrence risk. Ford just over what was staring him right in the face this was a clear signs I was suffering with science infection all this time.

Again, I am filing this Medical malpractice/ negligent complaint with this a motion for **continuous treatment doctrine** and to also **show extraordinary** cause as to why this cause should continue. In the most famous is **Gideon v. Wainwright**, in which the **high court states that to have or provide lawyers to defendants who can't afford** a lawyer in state courts, just as the **federal courts**. I also feel this way because we do not have the same playing field. Instead, we have doctors in Tennessee they all have the same insurance in which they would not right a medical letter on your behalf when they told you they will they change their minds. The problem is that if I did not have this document it would have been their word against mines or in your legal term hearsay. Instead we just need to live with the injury may it be mental or physical because we do not know how to draft petition and do not know the laws. This law suit is about principle too. This company is so use of committing medical malpractice to the point the know how to get away with it. They have done this in the 1980's as mention in the above statement and is still doing this to people today. The poor should not be given a pass for doctors do what they want at will and thinks it is okay. Let's say that Ford did not do anything wrong and I did not have everything document. Are we saying that even though I gave Ford permission to do the procedure he can go **beyond my consent** to open me up on a close procedure? And, then leave a scare as if I would never notice. let say that he did the surgery great, we can not over look that Ford done extra things to me that was not necessary and this procedure did not consist in opening me up at all because my nasal was **not deform severely** and I was not inform that it was.

I am having reconstruction surgery to fix the medical error Ford done on me on August 10, 2011. I have suffered complications, which require ongoing treatment. And what I do know is that the Tennessee general ENT doctors here does **not recognized** the Setoplasty technique Doctor Andrew Hunter Ford (hereinafter Ford) perform. I would like to let the record show **that I am doing a documentary** in this cases in which I am filming what Ford done to me during surgery so that I the court, and former doctors here can actually see what Ford done to me. Since these regular general ENT does not know, this would benefit them and me and it would not hurt for this case to be one for the landmark case as to how far would a insurance company that represent the whole state of doctor in Tennessee go to protect there interest on a claim. And, how the consist doctrine is take from a doctor prospected. And how can a patient be abandon as a means of retaliation for just telling the truth as to what happen. I have been called everything other than the mother of God for reporting this matter to Mrs. Betty Rose and the patient advocate Jennifer the office manager (Based on information and belief the office manger name was Jennifer)

Now, what I know now is that mucus is a very necessary part of our human physiology. When it becomes excessive it is often a signal that something is of balance and that this needs to be corrected. Doctors must inform you of the procedure they will perform and

describe all the important risks. Since Ford intended to perform a closed Setoplasty and never mentioned performing an open Setoplasty. The turbinectomy was never discuss I was under anesthesia so I did not have a chance to tell for “no” then I woke up and he have remove my turbinate. I did not have a chance to give him an informed consent. The surgery was perform negligently.

My images scans **did not reveal any** damages in the nasal tip, yet Fords removed a large amount of nasal tip cartilage in which it left no strong support. So when Ford began to under or over-resection my the nasal septum cartilage and remove the bone in the back of my nasal septum cause pain when he crush the cartilage and then reinserted this back in my nose without testing the tissue with a pathology lab is just negligent.

And with this the nurse that was on the nurse report did not do a recount of the cottons/sponge count after surgery. This too is negligent.

August 17, 2011 was the first foreign object **that was schedule** to come out within seven days, was the two Doyle splint. But the nasal packing was still in me on this visit I continue to have **agonizing pain** which lead to infection and pain. **I kept going back for several more visited**. When I inform Ford of **my chief complaint** it would be ignored. I began to have emotional stress alone with the acute pain that continued all the way the second foreign object was the nasal packing device that was sewn in me. The reason I knew it was sewn is because Ford yank it out of my nose after being inside for several weeks which was September 01, 2011. Ford then told me that **he would not charge me** for the visit and he did not. I look at him like he was crazy because I just did not know why he told me this, and he did not inform me what he remove. What Ford did was yank the device out of my nose and place it in a regular trash can, somehow he got he out and then place it in he long white coat doctor jacket and discard of the device with blood in a trash can in the hall way.

August 25, 2011 I went back to Ford office because I was having problems with my swallowing and breathing. The pain was still going on but now my glands felt enlarge and my neck was hurting. Ford ignored this complaint too. I was having trouble breathing even though my nose was nice and wide. Again Ford stated in his dictation that my nose appears to be healing well. The letter head of this dictation was **for the wrong location** from where I had the surgery and where I been coming to for my follow up post op injury.

September 01, 2011 Doctor Ford was negligent as a matter of law for permitting the Nasal packing to remain in my nose after surgery for this long. In laws, a surgical tampon sponge or cotton was left in the nose following a Setoplasty and inferior turbinate reduction surgery that was performed by Doctor Ford. Before the incision in my body it was closed, **a nurse's count revealed that nothing the sponge or cotton was missing**. There was no X-ray done right away after the surgery. If this would have occurred the foreign object would have been seen this day. I have the X-ray/MRI done months later at this time the foreign object would not be seen. Even the crush cartilage Ford use in my nose to make the septum would not be seen on a MRI. Doctor Ford instead upon

discovering the sponge several weeks later the fact remains that when the incision was closed a sponge was left in my nose. And when Ford done his dictation of he office visit the letter head had the wrong address from where I went for my office visit. Instead of Ford writing the truth about the office visit he wrote something totally different. This was the day the nasal packing was remove. It was sworn in my nose and I have the scars to prove this too. Nasal scar is not noticeable not unless something did not heal well. This is why you are able to see the scare inside my nose because he yanks this out that lead to this particular scare. It is undisputed that Ford could not bill Medicare for medical errors that occur during surgery. That was the real reason Ford did not charging me for the other three (3) follow up visit.

My family and I were never even notified of the medical errors occurred. This is extremely alarming how medical professionals can get away and have already gotten away with committing malpractice by such means. Most medical professionals would never commit such acts, the fact we know it has happened should lead to changes. In my case the change began on **May 24, 2012** on my last visit, the clinic was having their entire patients' to sign a form of privacy act and to inform us to where to file a medical complaint. This was not in my record prior to this date because they never gave us this information until then.

Clearly, my medical record was not safeguarded by Murfreesboro Medical Clinic and there risk manager team when this event had occurred. A record or pages of it has disappeared, part of the discovery process involves determining who had access to the record. And a list with the date and time on how many time a person or agent went into my record. It is unacceptable for Doctor Ford to **alter and remove** medication, and treatment he claim he given me from my medical record. Murfreesboro Medical clinic risk managers should be involved when **the alteration** of medical records is discovered. And a third party should be involve as-well Doctor Ford had tampering with my medical record by adding to the **existing record at a later date without indicating the addition** is a late entry, placing inaccurate information into the record, omitting significant facts, dating a record to make it appear as if it were rewriting at an earlier time.

Since fraud has been committed **The Statue of limitations should be** extended based on the **premise that fraud** has been committed. I am having continued care from a post op in which I am having corrective reconstructive surgery to fix the problem. Plaintiff argued that in the **Pisel v. Stamford Hospital** case the rewriting of medical records or the destruction of pages, sections of an entire **medical record creates a strong suspicion** that **the information in the record was so damaging that it had to be concealed.**

Ford began to alter my medical records intentionally to altered and lose documentation for to conspire and to commit fraud this "aggravated or outrageous conduct" can result in the **granting of punitive** damages. But to add to an existing record altered, falsified my medical record **which is a crime** for purposefully to destroy my medical record for the **purpose to cover up medical malpractice.** Ford and his agent and or employer violated my due process wrights for the purpose for me to lose my opportunity to file a medical complaint against him (Ford) and the clinic. I went back to

Ford because I was still in severing pain and I was told by Sangeetha to go back even when I did not want to. This is when Ford felt that he should begin to back date his dictation. In **Williams v. Young**, 258 Ga. App. at 824, and 575 S.E.2d 648 **Following remand**, the Court ruled that Young's claims were therefore barred by the statute of limitation and the used to alter the statute of limitation with regard to the continuous treatment doctrine.

In order to deceive or mislead any person as to information, including, but not limited to, a diagnosis, test, medication, treatment or medical or psychological history, concerning the patient. Medication for thyroid treatment in which he never inform of until May 24, 2012 nearly a year later. Destruction of evidence is a crime and so is tampering with a witness. **Doctors seem to get preferential treatment from the courts.** To show fraud in obtaining your consent, or in concealing the effects of medical malpractice **punitive damages** are not covered by the doctor's Ford malpractice insurance.

For instance, Ford should be **brought up on federal charges** for providing **inaccurate** information to the state of Tennessee Medicare department for falsifying of records lying on the type of procedure he was performing. I believe that doctor Ford was charging Medicare for services that he should have never received. Expressly the Open Setoplasty in order to make more money from the government insurance that he should not have. **The assault and battery** charges (for performing the procedure without my knowledge or permission this behavior seems as a "**Norm**" at this facility. It is a fact that Doctor Ford or his agent/staff has tamper and or altered my records. Miss Kelly she went on a defensive mode I told her this too. She is a patient advocate but she works for the clinic and her judgment was clouded when I was speaking to her. Her action lead me to believe that everyone who come in this office and complain is being target as the criminal and they too are being ban for practice their medical rights. But they use this retaliation tactic as a mean to get rid of a patient.

Ford improperly caused me to continue care to treat the physical pain and mental anguish, the possibility of loss earning capacity **if any** and for physical impairment and significant medical expenses. I was told that I was lying and that they where going to ban me from the clinic. I called Middle Tennessee Clinic back to set up an appointment with them to ban me just because they are connected with them. I am being abandoned for Middle Tennessee Ears Nose and Throat clinic in Smyrna office with out a letter telling informing of this too the reason being is that these doctors work with Ford this is causing me such harm to find proper medical care in Nashville Tennessee.

September 08, 2011 I needed to see my PCP ever though I have not met this woman. I always been seen Sangeetha Mc Collum PA-C. I have not see my PCP at this location since I been there for years and I did not know why she was never their.

October 07, 2011 Two months after the Sepal surgery with Ford, I went to have a hearing test done at Vanderbilt Bill Wilkerson Center because Ford continued to ignore my hearing problems and I really needed for some one to listen to my complaints. So I

went to Vanderbilt and they done a hearing evaluation during these office visits I was diagnose with **bilaterally hearing lost** and in need for hearing aids. Ford is a ENT their as no reason for him not believe me again as to my illness. Just to let medical concern go is another form of negligent for failure to diagnose and delay in treatment.

October 11 2011 I then met Doctor Vinson in which she too is a General ENT to get my headache and nose pain with chewing, ear, aching dull num, and anxiety. Vinson thought I may have TMJ.

October 28, 2011 went to see my PCP and it was Sangeetha V. Mc Collum P.A. I been trying to see my PCP but for some reason Maria/Mariah continued to schedule me with Sangeetha instead of Doctor Retia Nirankari Agarwal M. D. Sangeetha has been working alone with no supervision. And this too has delayed my medical care. I felt at this point I needed to see a MD in stead of a nurse. I can't believe Sangeetha could be like, putting me off for days while I am having trouble with my condition, and this is something that I can never understand! Since, she had been working alone since I knew here at this office. So now I am suffering because of the mishap of their colleague that shouldn't have happen.

December 21, 2012 went to ER for Vomiting and fatigue and sinus. I was diagnosing with vomiting and Hypokalemia potassium.

January 10, 2012 I had a cervical CT images done that was order by Mark Williams (hereinafter Williams) at Southern hills with a different reading done from the radiologist this could be a sign of cancer cells but For Mark to just ignore these signed and not explain the reading to me is ridiculous and not to do more testing as a ENT physician is just negligent. William did not inform me to where to go and where to get treatment for the now Thyroid problem. I have obtained this illness because of the delay of treatment from these doctors. They kept telling me that the swollen pain I was feeling was in my head.

I should have been referral to have a chance to shrink the bilateral lymph nodes or malignancies involvement in my throat and cervical area. But to just have me not be control my swollen for this period of time is just insane. My **Thyroid gland homogeneous** has enhancement and there was mucosal thickening **along my lateral aspect of my left maxillary sinus** with cyst or polyps retentions Ford never order any **biopsy** he would had notice this too during the surgery. But he was hoping that the cyst or polyps would just go away. Ford was expected to do a **wait and see game** to see what they would do.

In my case they were just getting bigger. I then have an **uncertain findings of a bilateral symmetric submandibular gland enlargement significant** this was the third negligent that Ford and the other ENTs had Ignore because they felt I was making this all up. It is very frustrate when you have speech impairment and misjudge what you telling them as a lie. This problem is part of my disability. But I still should have gotten a referral from some one who deals with the **submanidbular gland**.

Doctor Cherdak wrote in my record that the pain could be more psychological than a real feeling. What I do not understand is how is this part of her medical expert as to the way a patient feel mentally when she **is not a license physiologist**. And she never told me this she just insert this information in my medical record. Today it was truly a real complaint. The scan speaks for it self.

Next the radiologist **had left the final report result** of my neck on my disk when I went to pick this up. So how the information on the radiologist was left on the disk and this was how I was able to get this information. Some how, the information was left their by mistake and I was able to retrieve it on my disk to even though they do not leave this information on disk for the patient to see what they wrote to the doctor. Based on information and belief I also notice that my tooth is missing its **right maxillary premolar and my left maxillary molar is absent**. The radiologist report I been getting is missing large about of information. This is why it would and should be good practice to compare the other CT scans and MRI readings so that Medicare/Medicaid would not bill for double services

May 21, 2012 went the ER again about my Sinusitis and pain was given antibiotic

May 24, 2012 went to my last visit with Doctor Ford he admitted to me that he treated me and diagnose me with thyroids but the problem with this too is that there was not test ran on me for Free Thyroxin Index T4, TSH, T-UPTAKE last year. Ford said that he treated me and gave me prescription of this medication since August 8, 2011. I want to let the record straight. There is no medication that I was given to prevent or control my thyroids and I would be able to give this information to as proof from the pharmacy.

May 25, 2012 Vinson treated me for post op pain a typical facial pain

May 29, 2012 Not for sure what day of the week it was but I am sure it was the last week of the month. Mrs. Jennifer Wilson (hereinafter Jennifer) told me she was going to cancel my up coming appoint with Doctor Ford and the Neurologist who was a women physician which was schedule for July 19, 20 12 because they was being me from the practice. I asked her why and she said since I felt that Doctor Ford was not helping me. So now she is my psychologist too. The problem is that I was given a reason as to why but when the letter came to my home nearly a month or so later it did not mention the discussion she and I had. The letter was vague written like a standard letter they address to the entire patient who makes a medical allegation.

April 09, 2012 Doctor Kelly A Carden once an Internal Medicine, Sleep Medicine, Critical Care Medicine, and Pulmonary Disease. This reason for this complaint is because of the mishandling of my medical care and her personal interest with Doctor Ford. She had written in my medical chart selecting this she wanted to address in their instead of everything we talk about. What I did not understand why she instructed me to go back and tape record doctor Ford ever though I did not want to go back to his office. If I did not go back I would not have been ban from the clinic. She told me that he was the only one that knew what all that he did to me. I told her know he did because he has been

forgetting what I had come there for. Ford remind me of my grandmother when she got to old that she began to forget things. She also mentions things in which she could have gotten this from me other than Doctor Ford and that when she mentions that I had surgery on my anterior turbinated.

April 10, 2012 Doctor Danielle Sherri Brain MRI W/O contrast shows normal MRI other than tiny mucous retention cyst in the right maxillary sinus, put she wrote **it was likely an incidental finding**. Again, if they would have look at all my MRI, CT scan and X-ray like I keep asking them to do and this is what they suppose to do is compare images. They would clearly know how much I am indeed suffering. But the lack of them not knows only because they are being just lazy is not good because it is delaying my care. It would not have hurt them to request the images because it would not have cost them anything either.

April 11, 2012 had nose bleed when I saw Sangeetha because it wanted stop I was told I had some nose damage prior to this appointment. Still having problem with my nose and explain this to Sangeetha. I was treated for hypertension and anxiety

June 20 2012 X-Ray of Temporomandibular Joint Bilateral (hereinafter TMJ) came back negative for TMJ

June 11, 2012 Diagnosed with Chronic Sinusitis but I was told on 07-15, 2011 that if I do not get this surgery done it would be **chronic infections** but it the other radiologist and ENT doctor pull these images they would have cam to that decision.

July 17, 2012 I receive a **vague letter** from Joseph A. Peay (CEO) that was a standard letter sent to me by Mrs. Betty J Rose (hereinafter Rose). Next, I then fax a letter and certified United Stated Postal mail. A **Notice of Intent to file claim** was sent to her (Rose).

Now, Mrs. Rose told me a different story for why I was ban from the clinic. She told me that Jennifer told her that I was rude to her over the phone and this was the reason why. I felt as if I was **being prank** because they both were telling me two different stories. She called me a lying and so they went on and cancel my July 19th this ban was not done correctly. They wrote a letter to protect their interest but the legal question lye as to how they going to ban me when the letter stated after July 30, 2012 I would no longer be a patient of their. This conversation was document as to what I was told and is different from what both Jenifer and Rose told me this was only done out of spike and envy and retaliation.

July 16, 2012 went back to Vanderbilt saw Dr. Kimberly Vinson, she then made a copy of the procedure that I brought in the office this day from my transcription of my procedure Ford did on me, Vinson then told me that never perform a procedure like this one before. I was informed that what Ford another object is still in my nose and this was the problem. Come to find out if crush cartilage that is reuse and replace in your nose is also know as a **foreign object**. And Vinson said that know one would be able to see this

in any MRI, CT scan, or X-ray. I then told Vinson that Ford wrote in my record On May 24, 2012 that this was all **supratentorial factors** that I suffer from taken the medication Levaquin. This medication leads to side effect illness which Doctor Ford ignored.

The surgery Ford performs is unpredictable procedure this should not be done this way because of the very reason. Doctor Kimberly Vinson stated that she could not explain the medical records being tamper by Ford but she did said that it's not suppose to be like this. Dr. Vinson also stated that she have to get with other physician who is her partner at Vanderbilt because she have not ever perform a procedure like this one for a Setoplasty. Dr. Eugene Kern, who coined the term "**empty nose syndrome**", claims that this condition often gets worse over the years through increasing **wear and tear of the remaining mucosa in the nasal cavity, because the lack of turbinates leaves the mucosa overexposed to unduly patent currents of unfiltered, and under-conditioned airflow on every inspiring breath.** But the problem with this that some of them are not familiar with the "**Empty Nose Syndrome**" My images look empty this is how Stern came up with this in 1990. The Ct scans look empty to the naked eye and this is how they came up with this name for the empty nose syndrome or Wide **nose syndrome**. My nose is now nice and wide inside. This is one of the side effects from the surgery too and they did not inform me of this either. In fact, when the loss of turbinate tissue from which the nasal mucosa can **not recuperate** from the daily onslaught of **direct airflow**.

July 22, 2012 Today I was waiting on Dr. Kimberly Vinson to call back to give me the answer on what Doctor Ford did. I have not heard back as of yet. I was having high fever and temperature too.

August 1, 2012 diagnose with **rare bacteria** infection and sinusitis 20,000 of mix bacteria and mucus which is a rare condition with my blood being low. Doctor Greaves stated that in years that he practices him never saw anything like this before. When I told Sangeetha from my PCP office she laugh at me and through it was funning. I told her that I could not get my injection for my neck until all of the infection is gone. She then told me that she just going to say that my infection was gone in which it has not left my body just yet. I was having a high fever and temp this day too.

August 6, 2012 was diagnose with swelling mass lump in head and or neck area 784.2 but was not told anything about this illness. The problem with this diagnose is that I had this problem since January 10, 2012 but Doctor William lack to tell me about it. I did not get any treatment for this at all. No follow up nothing or anything. and post op pain 338.18 on August 06, 2012 it was discuss but I was not told what to do about it at all he told me it did not have anything to do with my surgery and that What Medicare I is unaware about the true type of Setoplasty being perform. An **open Setoplasty** by means of an open **Rhinoplasty approach** to address the septum and the problem with my septum my have been unnecessary. The technique Ford did is debatable and unpredictable. What Ford fell to do is to address this to Medicare / Medicaid and me. Especially if it effect my **nasal tip** if the procedure is going to cause a noticeable scar and the only reason it may have been noticeable is because of the way it was sewn back

together and this would have caused the scare to heal wrong this is how I knew about the external incision.

August 12, 2012 20,000 of mix bacteria and mucus cause some elevated of my blood pressure and fewer and pulse and this was strong evidence of an infection. At home, I experienced severe stomach pain, fever and chills and I returned to the hospital. While in the hospital, my blood pressure was elevated up and down and this was an **unknown bacteria fungus infection**. I continued to experience severe upper stomach pain. Sangeetha who performed the vaginal prep smear and she stated that everything was normal. But during the test she did not check my stomach.

Sangeetha failed to rule out other bacteria that could have been spilling into my **salivary gland and maxillary sinus** over a period of time causing **unknown bacteria infection**. I endured pain for months' the pain that lead for me to go too the ER and they too could not tell me **where my fever is coming** they just did not know. I have presented myself to my family doctor with history of nasal drainage and fever for months now for which I took an over-the-counter medication and this only work temporary. Instead, my neck continued to swell as a result of the bacterial infection. What I do know is that my anatomy was not like Ford other patients. I truly believe that Ford open up his entire patient up for a Setoplasty. What I do not understand is why no one done a **nasal culture for fungal and bacterial infections, skin testing for TB, Fungi and anergy, VDRL, FTA-ABS, CANCA, biopsy to rule out autoimmune..** Since we do not know how large the **lymph nosed node 1 cm in diameter** is considered abnormal and should be consider for **biopsy** if it was diagnose with uncertain. But was never done I done all the leg work myself while I was sick and this was the hardest then than having a baby.

I believe that my agreement has been breached by failure to diagnose a medical condition, the doctor a should be held liable This was a missed diagnosis that should not have happen I had to be a advocate for myself it was just to much with what I was going though. These doctors done selective listening, and there is no excuse for this. I have been injured by a medical provider, who should have been able to diagnose their condition but failed to these **doctor simply fail to explore all the possibilities**, to diagnosing my illness. Now I am seeing a oral surgeon tomorrow he is going to treat the swelling of my throat

August 6, 2012 I saw doctor Mark Williams (hereinafter Williams) for post op pain told me that I have every right to know what is going own with me. To tell him the problem I had with him and other about a problem that truly happen to me and ask why was they treating me this way. I was owed an apology.

August 6, 2012 Doctor Vinson called to inform me that she gave my medical record operation transcript report from Ford procedure to Doctor Reis (hereinafter Reis) who is a Board Certified Rhinoplasty Facial Plastic Surgeon informs Vinson that I did have a reasonable complaint for the pain I was experience. Another problem is that Ford is not a Board Certified Rhinoplasty Facial Plastic Surgeon. Ford is just a General ENT that could perform certain surgery without a subspecialty license. But to mislead a patient to

believe he is a Rhinoplasty surgeon and then perform Rhinoplasty and open Setoplasty or what every Ford done to me during this surgery have cause me to have corrective surgery.

August 9, 2012 I went back to James E. Taylor Jr. (hereinafter Taylor) after surgery, he too is a general ENT but he consider himself as a behavioral health doctor board eligible. He told me that I still had infection in my nasal tip where Ford inserted the crush cartilage. Doctor Taylor had a medical student who was an oral maxillofacial surgeon. Taylor did not ask me was it okay for the student to be in the room? Taylor felt that I need to see a physiologist only because he did not believe that Ford left a nasal packing in my nose and that Ford would not have done surgery on me without doing a X-ray before the operation. So this was how I knew that Ford was supposed to do this put as you can see he did. Taylor told off Ford because I was unaware that you suppose to do this before surgery. These confirm what I knew all along. I brought my husband to this visit because Doctor Taylor touches me inappropriate on my first visit this was the reason I brought my husband to this last visit with him. But Doctor Taylor tune change when I gave him the medical transcript Ford did on me and then he told me that he too would not do a Setoplasty like Ford done to me. But he would not tell me why he would not do it this way.

Next, I got X-Ray from Doctor Justin Ard, D.C. (Hereinafter Ard) this was the first time I meet him. I normally deal with Josh. I got x-Ray of my neck and back. I asked about the billing break down he would not give it to me. He wanted to get some type of loan instead of Medicare paying for the treatment. I believe to pain for the part B Medicare would not pay at least 80% but he wanted me to pay this with cash. It was around three thousand dollars. And, he told me that I would not be able to get a copy of my ultra should of my neck and back on a CD because it belong to him. He told me this was the Tennessee Law.

August 7, 2012 I then called and spoke with Mrs. Jackson about the experience I had with Doctor Taylor. She then told me to speak with Mrs. Sharon Halpern. She told me that she would talk with Doctor Taylor. She did right after I got off the phone. She told me that Doctor Taylor told me what to do. She told me that she trust her children with Doctor Taylor. I felt that the personal interest that other doctors put her trust her colleague is strange when you have proof on how you was being treated in front of students. I felt that Doctor Taylor behavior was inappropriate and it was done in front of the student

August 9, 2012 I wrote a letter and send MRI, CT scan too doctor **David Slavitt** (hereinafter Slavitt) who inform me that he can do reconstructive surgery to fix my nose. He asked me why this doctor or Doctor Ford do a tissue sample I told him I just do not know. Slavitt told me that there are things could have done. But none of them done that but treat me with antibiotic, this man told me that he could fix my problem in thirty 30 days in which these doctor could have done in a year.

August 10, 2012 I wrote letter for Intent to Sue to Doctor Kelly A. Carden

August 03, 2012 I had a follow-up for my pain with Doctor Lee.

August 08/30/2012 I went see Jessica Fay APN Nurse Practitioner at the Minute Clinic in Nashville because my office was close. She told me that she could not treat my sinus. But I told her that was fine because I was not there for my sinus. I wanted to know what fungus I was fighting because I was having problem with breaking my fever. What I meant is that once the antibiotic is out of my system the fungus bacteria returns. I am fighting with a temperature, high blood pressure, high pulse. She (Jessica) went to the medical book to see what fungus was the closest to what was on my neck. But, she (Jessica) informed me that it was nothing she have saw or recognize or saw before. So she said that since it was not in the book. I was going to say it was a Dermatophytosis on my body.

October 3, 2012 went to the oral surgeon Doctor Pitts (hereinafter Pitts) and he recommend that I see Doctor Reis personally instead of Vinson translating messages back and forth from her patient. I told Pitts that I going to do a document and this case need to be a case study for the Vanderbilt students since this case is one of a unique one. He told me to come back because he will take a picture with me so that it would be document for the story. Pitts also say that Reis would be the one to fix this but I told him since Vinson did not recognize the procedure that I was scared to let them do it with out filming this. He began to laugh and I told him after all this I hope I be able to laugh with him. Future visit will be schedule I also told him that I have appointment with doctor appointment Friday in Chicago. He then insists that I see Reis. Because he knew I am in sever pain and he believes that this is coming from the surgery back in August 10 2011, he told me that I have sinus infection in my maxillary area and this is why the lymph node are swollen. When I left the office I called to set this appointment up. To be continued...

WHEREFORE I pray for relief:

That this court grant my motion medical malpractice/negligent and continue of care doctrine to be delayed do to the fact that I need to have the same equal balance playing field as the defendant would have. And, I am having corrective surgery. I need to be able to have an attorney to handle this case. I did have one look at this matter. He informs me that his nurses do not recognize the surgical technique Ford did on me. This delay has continued to causing me and my family too much harm and money wise and mentally. This court need to consider that this could be them having to go out of state to find a physician that understands Ford procedure.

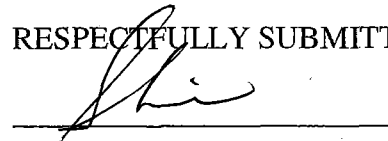
- A. Since Doctor Taylor verbally express that in the 30 to 40 years of his practice he had never perform a Setoplasty like the one Ford done on me should have been writing in the patient medical record. Instead I believe it a doctor tells a patient something in the examination it should be written in that patient chart. The patient has the right to know why he would not do this type of technique. Order the plaintiff to draft a subpoena requiring this doctor to testify on what he told the plaintiff.

- B. Grand a delay in filing because the patient is still extremely ill and in desperate need for immediate medical care. I have my visit to my doctor in Chicago on October 05, 2012. And to grant the entire defendant to be name in the complaints who are truly involve of my injury.
- C. Allow the Defendants to hand over all discovery document such but not limited to his medical procedure of his Setoplasty and Inferior bilateral Turbinated Reduction not limited to phone record from July1,2011 until October 2, 2012
- D. That this case be heard by a jury of twelve (12) as a matter of law. Since this should be there job to determine what is fair, just and reasonable compensation for this Plaintiff and her family.
- E. That this court gives the Plaintiff time to get all her doctors and expert witness letter since she have to do this while she is still very ill. This is taking away of my healing process but I need to get the energy to get this all done.
- F. That this court found the Defendants guilty for the approximately cause of the Plaintiff injury and that the plaintiff fear that she was afraid that she was going to die if she could never find out what was truly wrong with her. A doctor had told her she could die from this if the matter is not dealt with.
- G. That this court find the Defendants guilty of the Plaintiff injury and she be awarded Punitive damages in the amount of what the jury seems fit.
- H. That this court find the Defendants guilty of the Plaintiff injury and she be granted Compensatory damages which consist of Economic and or non-monetary damages for what she have suffered, or is reasonable likely to suffer in the future, loss of diminution of the ability to enjoy

life's pleasures and as a result of the defendant negligence in the amount of what the jury seems fit.

- I. That the Plaintiff husband be granted Loss of Consortium for the injuries the Plaintiff husband had to encounter. What the jury seems to be fit.
- J. Reasonable attorney fees in the amount of what the court see fit.
- K. That this court allows this case to first go through medication before the extension date is complete.
- L. The Plaintiff is awarded what ever this court sees fit.

RESPECTFULLY SUBMITTED

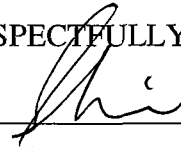


Shemeka Ibrahim
3916 Tea Garden Way
Antioch, TN. 37013
(615) 568-5046

CERTIFICATE OF SERRVICES

I Shemeka Ibrahim am sending this Motions to the above Defendants' by hand delivered or United States Postal Service Nashville, TN 37013. On this day 3 of October 2 2012

RESPECTFULLY SUBMITTED



Shemeka Ibrahim
3916 Tea Garden Way
Antioch, TN. 37013
(615) 568-5046

Cc. State Volunteer Mutual Insurance Company

Stephanie C. Hatchet attorney

101 West Park Drive Suite 300

Nashville, TN 37027-5031

President Barack Obama Chief Department of Health and Human Services Rep.

The White House
1600 Pennsylvania Avenue NW
Washington, DC 20500 202-456-1414

Tennessee Department of Health

425 5th Avenue North Cordell Hull Building, 3rd Floor Nashville, Tennessee 37243
(615) 741-3111

Health Insurance Portability and Accountability Act (HIPPA)

Washington D.C. Head Department of Health and Human Services Chief Rep Leon
Rodriguez, Director
Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F HHH Bldg.
Washington, D.C. 20201

IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF
NASHVILLE TENNESSEE

SHEMEKA IBRAHIM

)

Plaintiff

)

VS

) Docket NO. _____

DOCTOR FORD et al

) JUDGE _____

Certification of Good Faith

Pursuant to TN. Civ. R. * 208.2(e)

The undersigned counsel for Plaintiff hereby certifies and attests that:

☐ a. He or she has had the contacts described below with opposing counsel or

Unrepresented party regarding discovery matter contained in the foregoing discovery

Motion in an effort to resolve the specific discovery dispute(s) at issue and, further, that

Despite all counsel's good faith attempts to resolve the dispute(s), counsel have been

Unable to do so

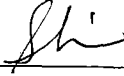
Description:

☒ b. I have made good faith but unsuccessful efforts described below to contact

Opposing counsel or unrepresented party in an effort to resolve the discovery dispute have not spoken to me since the filing of the Intent to Sue notification I gave back in July 17, 2012. Based on information and belief, I believe the reason being is that I am filing this temporary until I get a legal counsel. I have been truly ill and this is the reason of me being able to deal with this now. I am requesting this court to let the parties go through mediation before the final draft of the Amended of these Motions.

Description: Because I am representing myself one of the Defendant Kelly A. Carden did respond and is making a mockery of the procedure and the new Tennessee law in responding to the Intent to Letter to Sue that I have submitted to her by faxed at

CERTIFIED TO THE COURT BY:



Shemeka Ibrahim Pro se



CENTERSTONE

September 28, 2012

Middle Tennessee District Court
Nashville, TN

To whom it may concern

Dear Sir or Madam:

This letter is to confirm that Mrs. Shemeka Ibrahim has been a client of our clinic since November 11, 2011. She is being treated for Major Depressive disorder and anxiety directly related to her medical condition. Information in her progress notes indicate that her issues revolve around corrective surgery that she had and that she consistently experiences a lot of pain. The stress of her condition has also caused significant problems in her relationships with her family. Mrs. Ibrahim has been seen for therapy by Larry Harrison and is consistent with her appointments.

If you have any questions or concerns please feel free to contact Mr. Harrison at 615 460-4100.

Sincerely,

Melvin Ferguson, SLPE
Clinic Manager

Excellence in Mental Healthcare

P.O. Box 40406 - Nashville, Tennessee 37204-0406 - (615) 460-4560 - FAX (615) 460-4561



Murfreesboro Medical Clinic

1272 Garrison Drive

Murfreesboro, TN 37129

615-867-8110 www.mmclinic.com 1-800-842-6692

Department of Otolaryngology

Patient Name: [REDACTED]

Chart # [REDACTED]

[REDACTED] returns for follow up on her septoplasty and reduction of turbinates performed 08-10-11. She is having some migraine headaches. The nose is cleaned at this time. Debris is removed. All appears to be healing well.

IMPRESSION

Healing well after septoplasty and reduction of turbinates.

RECOMMENDATIONS

- 1). Continue saline use.
- 2). Return in four weeks for final check on healing.

Cc: Dr. Agarwal

Electronically signed by: ANDREW FORD MD Sep 20 2011 2:38PM CST



Murfreesboro Medical Clinic

1272 Garrison Drive
Murfreesboro, TN 37129
615-867-8110 www.mmcclinic.com 1-800-842-6692

Address
different
This is where I
had the surgery

Department of Otolaryngology

Patient Name: [REDACTED]
Chart # [REDACTED]

[REDACTED] returns for follow up on her septoplasty with reduction of turbinates performed 08-10-11. She is swallowing and breathing well. Debridement was accomplished at this time. All appears to be healing well.

IMPRESSION

Healing well after surgery.

RECOMMENDATIONS

- 1). Return in one month.
- 2). Continue aggressive saline use.

Electronically signed by: ANDREW FORD MD Sep 20 2011 2:38PM CST

Already sign



Comprehensive Visit

Murfreesboro Medical Clinic

1004 N Highland Ave

Murfreesboro, TN 37130

www.mmcclinic.com

Never been here
for surgery or
follow up.

Patient:



ANTIOCH, TN 37013

EMRN: 339751

Age/DOB: 39/Mar 14, 1973

Home: (615) 611-1111

Work:

Encounter Date: Aug 25 2011 9:00AM

returns for follow up on her septoplasty with reduction of turbinates performed 08-10-11. She is swallowing and breathing well. Debridement was accomplished at this time. All appears to be healing well.

IMPRESSION

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RECOMMENDATIONS

- 1). Return in one month.
- 2). Continue aggressive saline use.

Electronically signed by: ANDREW FORD MD Sep 20 2011 2:38PM CST

already signed

**Consultation Report**

Murfreesboro Medical Clinic
1004 N Highland Ave
Murfreesboro, TN 37130
www.mmcclinic.com

Patie
Age/DOB: 39/Mar 14, 1973

EMR
Encounter Date: Jul 15 2011 9:30AM

July 19, 2011

Reita N. Agarwal, MD
Good Health Clinic
625 N. Highland Avenue
Murfreesboro, TN 37130

RE: ~~DOB~~

Dear Dr. Agarwal:

It was a pleasure to see your patient, Shemeka Ibrahim, in my clinic July 15, 2011. This 38-year-old female presents for evaluation of her sinuses and ears. The patient says she had swollen lymph nodes in the neck noted and she was placed on some antibiotics. She says she thinks she might need a root canal that may be the problem for her neck and ear discomfort.

PAST MEDICAL HISTORY/SURGERIES: Dilation and curettage times 2.

MEDICINE ALLERGIES: NONE.

CURRENT MEDICATIONS: Clindamycin, etodolac, fluticasone, Lexapro, hydrocodone, Diovan.

FAMILY HISTORY: Significant for hypertension, stroke, and cancer.

REVIEW OF SYSTEMS: There has been fatigue, chills, blurred vision, trouble with sense of smell, stuffy and runny nose, shortness of breath, headache, chest pain, frequent urination, constipation, and weight gain.

SOCIAL HISTORY: Cigarette use none. Chewing tobacco none. Alcohol none.

PHYSICAL EXAMINATION:

VITAL SIGNS: Weight 250 pounds. Temperature 97.4° Fahrenheit. Pulse 76. Blood pressure 124/80.

GENERAL: Well developed, well-nourished 38-year-old female.

HEENT: Ears: External canals, tympanic membranes and middle ears are normal bilaterally. Nose externally is normal; internally reveals left septal deviation with marked turbinate hypertrophy. Mouth and pharynx are normal.

NECK: Normal.

CHEST: Clear to auscultation.

CARDIOVASCULAR: Regular rate and rhythm without murmurs, clicks, or gallops.

IMPRESSION:

1. Septal deviation with turbinate hypertrophy.
2. Soreness in the right neck and ear most likely of dental source.

**Consultation Report**

Murfreesboro Medical Clinic
1004 N Highland Ave
Murfreesboro, TN 37130
www.mmclinic.com

Patie [redacted]
Age/DOB: 39/Mar 14, 1973

EMR [redacted]
Encounter Date: Jul 15 2011 9:30AM

July 19, 2011

Reita N. Agarwal, MD
Good Health Clinic
625 N. Highland Avenue
Murfreesboro, TN 37130

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2. Soreness in the right neck and ear most likely of dental source.

Printed By: Kathy Howse

1 of 2

4/23/12 1:34:21 PM

Consultation Report

Patient: [REDACTED]
Encounter: Jul 15 2011 9:30AM

EMRN: [REDACTED]

NECK: Normal.

CHEST: Clear to auscultation.

CARDIOVASCULAR: Regular rate and rhythm without murmurs, clicks, or gallops.

IMPRESSION:

1. Septal deviation with turbinate hypertrophy.
2. Soreness in the right neck and ear most likely of dental source.

RECOMMENDATIONS: I recommend:

1. Complete evaluation with a dentist for tooth treatment.

I recommend she consider septoplasty with reduction of turbinates for improvement of nasal airway. She will think about this after the dental problem has been addressed.

Thank you for allowing me to see [REDACTED]

Sincerely,

Andrew H. Ford, MD

AHF/dmm

*I am not handing every thing in until I get legal
Assistance. But Ford does not have every thing I have.
Because he destroyed, ^{At least a rewrite etc...} all of the one I have.*